



Bureau of Waste Management

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
Post Office Box 2063
Harrisburg, Pennsylvania 17120



ORIGINAL
(F-1)

Preliminary Assessment

FOR
Cecchetti Ornamental Iron Works
PA #1457

City of Arnold
Westmoreland County
Pennsylvania

**ORIGINAL
(Red)**

The Cecchetti Ornamental Iron Works is no longer operated at the Arnold location. There is presently no indications of dumping. This heavily residential and business area had no depressed areas and there is no evidence of disposal. In addition, the new location as of 1979 at 801 East Hills Drive in New Kensington has no known history of disposal other than clean fill in the rear.

The only reference evident to indicate a disposal site was a March 26, 1972, letter from James P. Snyder to Cecchetti Ornamental Iron Works at 1503-4th Avenue, Arnold, Pennsylvania 15068. In this form letter, Mr. Cecchetti was requested to submit an application if he did own or operate a solid waste disposal or processing facility. There was no other correspondence to indicate any follow up by the property owner or the Department. Mr. Cecchetti did not even recall receiving the letter nor did he make any applications for a disposal site.

Due to the lack of any information to the contrary, I see no reason to complete a site inspection here.

ORIGINAL
(Red)

PA-1457



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
PA D	981036841

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) CECCHETTI ORNAMENTAL IRON WORKS		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 1503 4TH AVE			
03 CITY ARNOLD		04 STATE PA	05 ZIP CODE 15068	06 COUNTY WESTMORELAND	07 COUNTY CODE 65
09 COORDINATES LATITUDE 40°34'31.0" LONGITUDE 079°46'08.5"		08 CONG DIST 809			
10 DIRECTIONS TO SITE (Starting from nearest public road) ON A PUBLIC ROAD					

III. RESPONSIBLE PARTIES

01 OWNER (If known) ALFRED E. CECCHETTI		02 STREET (Business, mailing, residential) 801 EAST HILL DRIVE			
03 CITY NEW KENSINGTON		04 STATE PA	05 ZIP CODE 15068	06 TELEPHONE NUMBER 1412 339-0008	
07 OPERATOR (If known and different from owner) SAME		08 STREET (Business, mailing, residential)			
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()	
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> G. UNKNOWN					

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☐ A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103(c)) DATE RECEIVED: ____/____/____ MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 5.28.87 MONTH DAY YEAR <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)	
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN	
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED UNKNOWN			

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
NONE

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time schedule basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT MARK GORMAN		02 OF (Agency/ Organization) PA. DEF BUREAU OF WASTE MGT		03 TELEPHONE NUMBER 814 724-8524	
04 PERSON RESPONSIBLE FOR ASSESSMENT GERARD TRIPOLI		05 AGENCY PADEF	06 ORGANIZATION B.W.M.	07 TELEPHONE NUMBER 1412 925-8115	08 DATE 6.12.87 MONTH DAY YEAR

PA-1457



I. IDENTIFICATION

01 STATE PA D	02 SITE NUMBER 981036841
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01 PHYSICAL STATES (Check all that apply)

- 02 WASTE QUANTITY AT SITE

(Measures of waste quantities must be independent)

TONS

CUBIC YARDS

NO OF DRUMS

03 WASTE CHARACTERISTICS (Check all that apply)

- | | | |
|-----------------|--------------|-------------------|
| - A TOXIC | E SOLUBLE | I HIGHLY VOLATILE |
| - B CORROSIVE | F INFECTIOUS | J EXPLOSIVE |
| - C RADIOACTIVE | G FLAMMABLE | K REACTIVE |
| - D PERSISTENT | H IGNITABLE | L INCOMPATIBLE |
| | | M NOT APPLICABLE |

NONE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS numbers)

[illegible]

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references e.g. state laws, sample analysis, reports.)

ALFRED E. CECCHETTI DENIED EVER HAVING A DUMP AT THE OLD LOCATION - POSSIBLY A SCRAP YARD PA. WESTMORELAND CO. FILE | DAVE STITT - NEW KENSINGTON C.E.O.

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(Red)

PA-1457



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

PA0 981036841

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: _____ (Acres)

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

NA

ORIGINAL 1457

IDENTIFICATION

01 STATE 02 SITE NUMBER

PAD 81036 84

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

NA

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (INCLUDE NAMES OF SPECIES)02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

NA

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

NA

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Solids/liquids/standing liquids/leaking drums)
03 POPULATION POTENTIALLY AFFECTED: _____02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

04 NARRATIVE DESCRIPTION

NA

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

NA

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

NA

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION02 ☐ OBSERVED (DATE: _____)☐ POTENTIAL☐ ALLEGED

NA

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL OR ALLEGED HAZARDS

UNKNOWN

III. TOTAL POPULATION POTENTIALLY AFFECTED: NONE

IV. COMMENTS

THERE MAY HAVE BEEN A SCRAP IRON PILE, BUT NO EVIDENCE
OF IT NOW.

V. SOURCES OF INFORMATION (Cite specific references e.g. state files, sample analysis, reports)

PA. WESTMORELAND CO, FILE
DAVE STITT - NEW KENSINGTON - CODE ENF. OFFICER.

FIELD TRIP SUMMARY REPORT

ORIGINAL
(Red)

This summary should be prepared in conjunction with the Preliminary Assessment, EPA Form 2070-12.

EPA Case Number PAD981036841 Site Name CECCHETTI ORNAMENTAL IRON WORKS

Site Description	
ORNAMENTAL IRON WORKS UNTIL 1979 - POSSIBLY A SCRAP IRON STORAGE AREA. NONE NOW.	
Area of site (acres)	Hazardous portion, if not entire site
NA	NA
Description of processes/operations which took place at the site	
NA - IRON WORKS - SCRAP IRON STORAGE POSSIBLY	
Waste handling/disposal practices	
NONE	
Site topography and runoff drainage pathways	
FLAT	
Surface or subsurface drainage areas (leachate) noted?	Odors/stains noted?
NA	NA
	Stressed vegetation noted?
	NA
Location and description of streams or receiving waters adjacent to site. Include flow direction and observations. Note location on attached map.	
NONE	
Monitoring wells on site or in vicinity. Note location on attached map.	
NONE	

Population within $\frac{1}{2}$ mile of site:		Population within 1 mile of site:	
<input type="checkbox"/> 0-10 <input type="checkbox"/> 10-100 <input checked="" type="checkbox"/> greater than 100		<input type="checkbox"/> 0-10 <input type="checkbox"/> 10-100 <input type="checkbox"/> 100-1000 <input checked="" type="checkbox"/> greater than 1000	
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Surrounding land use (woodlot, agricultural, recreation, industrial, etc.)			
NORTH	RESIDENTIAL	EAST	RESIDENTIAL
SOUTH	RESIDENTIAL	WEST	RESIDENTIAL
Municipal water supply within 3-mile radius (note use of surface water and/or wells) NEW KENSINGTON WATER TREATMENT PLANT WITH SURFACE WATER INTAKE			
Reference:			
Domestic wells. Approximate number within $\frac{1}{2}$ mile: <u>0</u> List nearest wells below and show locations on attached map.			
Owner/Resident	Address	Phone	
Groundwater flow direction, if known			
UNKNOWN - PROBABLY TOWARDS RIVER - DUE WEST.			
Description of odor/taste problems			
NA			

State inspection activity (including permits held)
NONE
State/Federal/Private remedial activities
NONE

Additional comments--Further description of site

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ITE CONTACTS

Name and Title	Affiliation	Phone

INSPECTION INFORMATION

Name and title of inspector(s) GERALD H. TRIPOLI

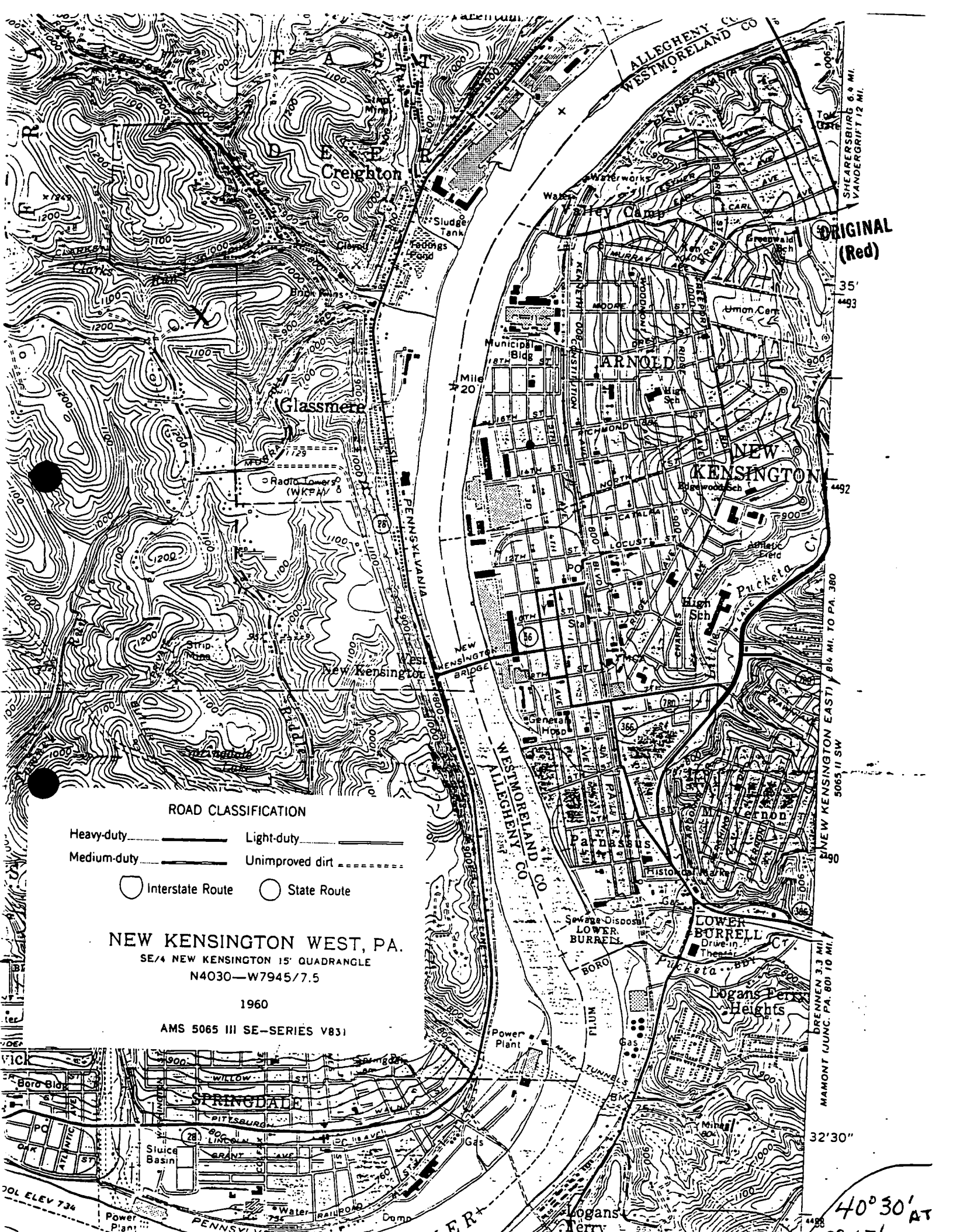
Agency PA. D.E.R. - B.W.M. Phone number (412) 925-8115

Date 5-28-87 Time on site 1.0 HRS

Weather conditions: HOT & CLEAR.

ATTACHMENTS

- o Topographic map identifying site location. Include name of quadrangle map.
- o Site sketch map showing location of monitoring wells, domestic wells, municipal water supplies, and areas of concern (lagoons, leachate seeps, drums, etc.)
- o Any available sampling results or state monitoring data with map showing sample locations.



ROAD CLASSIFICATION

Heavy-duty ——— Light-duty ———
Medium-duty ——— Unimproved dirt ———

○ Interstate Route ○ State Route

NEW KENSINGTON WEST, PA.

SE/4 NEW KENSINGTON 15' QUADRANGLE

N4030—W7945/7.5

1960

AMS 5065 III SE—SERIES V831

ORIGINAL
(Red)

SHEARERSBURG 6.4 MI.
VANDERGRIFT 12 MI.

NEW KENSINGTON EAST 1/4 MI. TO PA. 380
5065 III SW

DRENNEN 3.3 MI.
MAMONT (JUNC. PA. 80) 10 MI.

40°30' AT